

State of Maine Department of Human Services 11 State House Station Augusta, Maine 04333-0011

John R. Nicholas Commissioner

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Dear Consortium Member.

We'd like to thank the consortium members who attended the Maine Environmental Public Health Tracking System (EPHTS) Planning Consortium meeting on March 3rd, 2004, update members who could not attend, and provide plans for the next meeting on June 2nd. We'll also take this opportunity to let you know the steps we were taking to incorporate your feedback from the March meeting.

We are at a critical period for EPHTS in Maine. We are just past the halfway mark of our planning grant. In a short year and a half, Maine will likely have to compete with other states to obtain ongoing funding for the EPHTS. That means competing against other states, like Maine, with planning grants, as well as states that have pilot project and data linkage grants. There are some important unknowns, such as just how much funding will be available to support state-specific tracking activities versus nation-wide core tracking activities, and what will be the initial nation-wide core tracking activities. In response to this uncertainty, we developed a strategy to expand our planning efforts to include pilot tracking projects that we strongly believe will enhance both our planning process as well as our ability to compete for continued funding.

The primary objective of the March 3rd meeting was to obtain feedback from you on three proposed pilot tracking projects. The proposed pilot tracking projects are: 1) tracking of the occurrence of acute asthma visits to emergency departments attributable to ambient air ozone; 2) tracking of carbon monoxide poisoning and linkage of these health data with power outage data; and 3) tracking of awareness and response to public health intervention efforts intended to reduce exposure to methylmercury from consumption of fish. These three were proposed because they are consistent with Maine environmental public health priorities based on priorities identified by the Environmental Priorities Project, Healthy Maine 2010, and responses from those planning consortium members that completed the indicators survey. They also represent a range of tracking activities that involve the major elements of EPHTS: linkage of environmental hazard and health outcome data, direct electronic reporting of data through the developing IT public health infrastructure (NEDSS & HAN systems), biomonitoring, and tracking to evaluate public health intervention programs. We heard general agreement from you with our selection of these three pilot tracking projects and our strategy. Work is now underway.

We also heard you express interest in seeing us work on additional EPHI projects. For example, an interest was expressed for tracking systems for developmental disabilities and biomonitoring for persistent organic pollutants. We are very excited by these suggestions. We are actively discussing the possibility of providing funds to our Children with Special Health Needs Program so that they can explore the feasibility of a pilot surveillance system for developmental disabilities in Maine by obtaining data from the four state-funded Developmental Evaluation Clinics. We are also planning to assign a staff

toxicologist to assist our Health and Environmental Testing Laboratory to prepare plans for increasing biomonitoring capacity.

The feedback from your evaluation forms for the March 3rd meeting was very positive. In general, attendees felt the goals of the meeting were met and they liked the meeting format. However, five out of the twenty-three attendees who completed the evaluation forms noted that they were unclear about the role of the Consortium, especially with respect to their role in selecting priority environmental public health indicators. They expressed a sense that the selection of the three pilot linkage projects seemed decided upon prior to their input.

For us, these comments raise at least two issues. First, although we have addressed this issue in previous meetings and written communications, we realize that there are some new consortium members and that scheduling conflicts have prevented some members from attending all consortium meetings. Therefore, we want to again provide text from a letter sent to consortium members in August 2003 that talks about the advisory role of the consortium:

"It is useful to keep in mind our major objectives for this CDC funded initiative. By October of 2005, we are required to have a plan for the staged development of a standard-based environmental public health tracking network that allows direct electronic data reporting and linkage within and across health effect, exposure, and hazard data. We must also examine the feasibility of using the Environmental Public Health Indicators Project for surveillance. To achieve these ambitious objectives we are looking to the planning consortium to act as an advisory group and provide recommendations on the following: a) needs and concerns of data users and stakeholders related to tracking health effects, exposures and hazards; and b) priority health effects, environmental exposure, and hazard tracking systems to be enhanced or developed as part of a tracking system for Maine."

We are updating our web page for EPHTS so that it has the full text of this letter, as well as presentations and relevant documents from all the consortium meetings, and useful links, including the CDC Environmental Public Health Tracking Program and to the Pew Commission 2000 report "America's Environmental Health Gap: Why the Country Needs a Nationwide Tracking Network". We hope this will be a valuable resource for all of you and should have it operating prior to the June 2nd meeting.

Second, we wonder if perhaps there may be some confusion as to whether the three pilot tracking projects represent in entirety the priority Environmental Public Health Indicators (EPHI) that Maine will focus on. They do not. As noted above, these three pilot tracking projects are ones we proposed in large part because they are ready to jump from planning exercises to pilot work. We very much intend to continue to explore other EPHIs with the Planning Consortium. Indeed, this will be the major focus of the June 2nd and October 5th Planning Consortium meetings.

The June 2nd meeting will again be at the Senator Inn in Augusta Maine, from 7:30 until 1:30. A draft agenda is attached. We will be presenting our progress on the three pilot tracking projects, but the focus of the meeting will be on other potential EPHIs. There will be presentations on four potential EPHIs that we have heard interest in from consortium members (see agenda). There will additionally be a session to

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brainstorm on other potential EPHIs so information can be gathered for presentations at the October 5th meeting. So please be thinking about any data linkage projects, chronic diseases, or environmental hazard data systems that you believe should receive attention as part of a Environmental Public Health Tracking System.

We are pleased to announce that our lunch speaker will be Dr. Suzanne Condon, Assistant Commissioner for the Center for Environmental Health at the Massachusetts Department of Health. Dr. Condon will be presenting work Massachusetts has conducted under a CDC EPHTS pilot project implantation grant.

Should you have any questions or concerns, please contact either Judith Graber or myself. As always we look forward to your participation!

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Sincerely,

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